

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF

Jane Rocio Evans

DEFENDANT

Baker Places, Inc.

COURT CASE NUMBER

C08-776 WHA

TYPE OF PROCESS

Summons, Complaint, Orders

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
SERVE **AT** Baker Places, Inc., 600 Townsend St., Suite 200e
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 San Francisco, CA 94103

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Number of process to be served with this Form 285

5

Number of parties to be served in this case

1

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

RECEIVED
UNITED STATES MARSHAL

Fold

Signature of Attorney other Originator requesting service on behalf of **SUSAN IMBRIANI** PLAINTIFF DEFENDANT TELEPHONE NUMBER 415-522-2061 DATE 2/11/08

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. 11	District to Serve No. 11	Signature of Authorized USMS Deputy or Clerk	Date 2/12/08
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above) X Yolanda McDaniels - OFFICE MANAGER	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date 02/26/08 Time 9:30 am <input checked="" type="checkbox"/> pm
Signature of U.S. Marshal or Deputy R. D. Jones	

Service Fee \$45.00	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or (Amount of Refund*) \$0.00
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REMARKS:

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED